

**Before the  
Federal Communications Commission  
Washington, D.C. 20554**

In the Matter of	)	
	)	
Lifeline and Link Up Reform and	)	WC Docket No. 11-42
Modernization	)	
	)	
Federal-State Joint Board on Universal	)	CC Docket No. 96-45
Service	)	
	)	WC Docket No. 03-109
Lifeline and Link Up	)	

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**INITIAL COMMENTS OF  
THE INDIANA FAMILY AND SOCIAL SERVICES ADMINISTRATION  
ON SECTION VII IMPROVING PROGRAM ADMINISTRATION – COORDINATED  
ENROLLMENT**

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**Introduction**

The Indiana Family and Social Services Administration (“Indiana FSSA”) respectfully submits these initial comments regarding the Federal Communications Commission’s (“FCC”) Notice of Proposed Rulemaking (“NPRM”) on March 4, 2011. The comments submitted are to provide a general feedback to Section VII of the NPRM, specifically Coordinated Enrollment. The Indiana FSSA appreciates the opportunity to contribute to the policy discussion.

**Comments**

The FCC seeks comments on whether mandating coordinated enrollment of the Lifeline Link Up Program would be appropriate.<sup>1</sup> Coordinated enrollment is defined as a mechanism that allows consumers to enroll in the Lifeline Link Up Program at the same time they enroll in a qualifying public assistance program.<sup>2</sup> And while Indiana FSSA believes the Lifeline Link Up Program is a worthy program, a mandated coordinated enrollment would impose an undue administrative and financial burden on state agencies. There is also the issue of the FCC’s legal authority to mandate such a requirement of a state agency. Therefore, Indiana FSSA is opposed to a mandate of coordinated enrollment.

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<sup>1</sup> Paragraph 201 of the FCC’s NPRM.

<sup>2</sup> Paragraph 199 of the FCC’s NPRM.

Indiana FSSA is a health care and social services funding agency established by the Indiana General Assembly in 1991 to consolidate and better integrate the delivery of human services by State government. One of the primary responsibilities of Indiana FSSA is to administer cash assistance (TANF), child care assistance, food stamps (SNAP), and employment and training services for low-income clients, as well as, Medicaid eligibility throughout the state. Additionally, Indiana FSSA is required to determine eligibility for services within federal and state prescribed timelines for many of the programs including TANF, SNAP and Medicaid.

Imposing a mandated coordinated enrollment would drastically affect the way Indiana FSSA administers its public assistance programs. Currently, Indiana FSSA uses the Indiana Client Eligibility System (“ICES”), which is the mainframe computer system used to determine eligibility and benefit amounts for families requesting and receiving TANF, Food Stamps, and Medicaid. This unfunded mandate would, at the very least, require Indiana FSSA to upgrade and redesign ICES to include the new program. The costs to update technology and programmatic processes would be significant. Additionally, there would be costs to train staff and contractors, which ultimately would divert state resources from Indiana FSSA’s primary responsibilities while potentially affecting Indiana FSSA’s ability to meet federal time limits for determining eligibility for its public assistance programs. And because the issue of coordinated enrollment has not yet been well developed, there could be other unforeseen costs with implementing the program.<sup>3</sup> And while there should be coordination of public service agencies with the state commissions administering the Lifeline Link Up Program, a coordinated enrollment would impose an unfunded mandate on state agencies responsible for public assistance to perform duties that are not under their regulatory purview.

In conclusion, Lifeline Link Up Program is an invaluable program in these economic times. Reforming and modernizing the program is essential in ensuring access to the program. However, imposing an unfunded coordinated enrollment mandate would be overly burdensome administratively while placing further economic strain on state budgets.

Respectfully submitted,

The Indiana Family and Social Services Administration

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<sup>3</sup> Paragraph 201 of the FCC’s NPRM.